

Form O: Texas Department of Health
Bureau of HIV & STD Prevention

ASSURANCE OF COMPLIANCE WITH REQUIREMENTS FOR CONTENTS OF
AIDS-RELATED WRITTEN MATERIALS, PICTORIALS, AUDIOVISUALS,
QUESTIONNAIRES, SURVEY INSTRUMENTS, AND
EDUCATIONAL SESSIONS, AND ITS PREFACE

The applicant agency certifies that its Project Director and Authorized Business Official:

have received a copy of the *Requirements for Contents of AIDS-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey Instruments, and Educational Sessions in Centers for Disease Control Assistance Programs*, dated June, 1992, and its *Preface*;
have read them;
accept them;
agree to comply with all particulars and specifications set forth; and
agree that all specified materials shall be submitted to the local program materials review panel and subject to the CDC Basic Principles set forth.

Following are the names, occupations, affiliations and addresses of the proposed panel members: (use attachment page if needed.) One member must be an employee of the local health department.

Name	Occupation	Affiliation and Address

Applicant Agency

Signature of Authorized Official

Date